

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	DA	65117	10/16/98
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	VT	69607	10/27/98

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	4/10/97	
2	✓	4/10/97	
3	✓	4/10/97	
4	✓	4/10/97	
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6	✓	4/10/97	
7	✓	4/10/97	
8	✓	4/10/97	
9	✓	4/10/97	
10	✓	4/10/97	
11	✓	4/10/97	
12	✓	4/10/97	
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Claim	Final	Original	Date
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BEST AVAILABLE COPY If more than 150 claims or 10 actions  
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